## PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s) to:

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

-					Alexandria, VA		
MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. all further correspondence including the Patent advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)							
23494 759							
PO BOX 655474, M/S 3999					I hereby certify that this Fee(s) Transmittal is being electronically filed with the United States Patent and Trademark Office on the date shown below.		
				Ann Trent		(Depositor's name)	
				/Ann Tren	t/	(Signature)	
				2007-02-2		(Date)	
						· · · · ·	
APPLICATION NO.	FILING DATI					D. CONFIRMATION NO.	
10/001,707	10/25/200 <sup>-</sup>	1 Theodore	e W. Houst	on	TI-31245	2956	
AN INTEGRATED (		ISSUE FEE		CATION FEE	TOTAL FEE(S) D	IG BETWEEN LINES IN	
Nonprovisional	NO NO	\$1400	FOBL	\$300	\$1700	04/30/2007	
Honprovisional	110	Ψ1400		Ψ300	Ψ1700	04/30/2001	
EXAMIN		ART UNIT	CLASS-S	UBCLASS			
Mark V. Prenty 2822  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).   2. For printing on the patent front							
Use of PTO form(s) and Customer are recommended, but not required.  page, list (1) the names of up to 3 page, list (1) the names of up to 3 registered patent attorneys or agents OR,							
☐ Change of corresp form PTO/SB/122) attack	nge of Correspondence Ad	atively, (2) the na g as a member a	me of a single firm 2 registered	W. James Brady III			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) 2 re(				stered patent atto	the names of up to rneys or agents. If 3 ame will be printed.	Frederick J. Telecky, Jr.	
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless and assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
TEXAS INSTRUMENTS INCORPORATED DALLAS, TX 75265							
Please check the appropriate assignee category or categories (will not be printed on the patent) 🔲 individual 🗵 corporation or other private group entity 🔲 government							
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
<ul> <li>✓ Issue Fee</li> <li>✓ Publication Fee</li> <li>✓ Publication Fee</li> <li>✓ Publication Fee</li> </ul>							
Advance Order - # of Copies The Commissioner is hereby authorized to charge the required fee(s), or commissioner is hereby authorized to charge the required fee(s), or commissioner is hereby authorized to charge the required fee(s), or commissioner is hereby authorized to charge the required fee(s).							
The COMMISSIONER OF PA	ATENTS AND TRADEMAR	RKS is requested to apply t				(enclose an extra copy of this form).	
THE COMMISSIONER OF TA	THE TOTAL TO THE PROPERTY OF	The is requested to apply t		ia i abileation i e	c (ii diry) to the application	in identified above.	
Authorized Signature /Peter K. McLarty/				Date	2007-02-23		
Typed or printed name Peter K. McLarty			-	Registration N	o. <u>44,923</u>		
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.  Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of							
time required to complete th	is form should be sent to	the Chief Information Offic	er, United State	s Patent and Tra	ademark Office, Washing	e. Any comments on the amount of Iton, D. C. 20231. DO NOT SEND atents, Washington, D.C. 20231.	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

Page 2 of 3